PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 8, 2004									Application or Docket Number			
CLAIMS AS FILED - PART I SMAL (Column 1) (Column 2)							SMALL EN TYPE	TITY OTHER THAN OR SMALL ENTITY				
U.S. NATIONAL STAGE FEES			T				1	RATE	FEE	7	RATE	FEE
BASIC FEE			SMALL ENT.	SMALL ENT. = \$ 150		RGE ENT. = \$ 300	1	BASIC FEE	1	OR	BASIC FEE	300
EX	AMINATION F	EE		Satisfies PCT Article 33(1)- (4) = \$50/\$100		other situations = \$ 100 / \$ 200	]	EXAM. FEE		1	EXAM. FEE	200
SEARCH FEE			U.S. is ISA = \$ ALL other cour	U.S. is ISA = \$50 / \$ 100 ALL other countries = \$200 / \$400		other situations = \$ 250 / \$ 500		SEARCH FEE		].	SEARCH FEE	400
FEE	E FOR EXTRA	SPEC. PGS.	minu	us 100 =		/ 50 =		X \$ 125 =		] .	X \$ 250 =	
TOTAL CHARGEABLE CLAIMS			17 min	7 minus 20 =				X \$ 25 =		OR	X \$ 50 =	1
IND	EPENDENT C	LAIMS	3 mi	3 minus 3 = .				X \$ 100 =		OR	X \$ 200 =	1
MUI	LTIPLE DEPE	NDENT CLAIM PRI	ESENT					+ \$ 180 =		OR	+ \$ 360 =	17
* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL							TOTAL		OR	TOTAL	900	
		(Column 1) CLAIMS REMAINING	AMENDED -	(Column 2) (Column 3)  HIGHEST NUMBER PRESENT				SMALL E	ADDI- TIONAL	OR	OTHER SMALL E	
AMENDMENT A	(11)	AFTER AMENDMENT		PREVIO		EXTRA			FEE			FEE
NDWE	Total	17	Minus	" 20	<u>)                                    </u>			X \$ 25 =		OR	X \$ 50 =	
AME	Independent	.3	Minus '	<u>3</u>			1	X \$ 100 =		OR	X \$ 200 =	
	FIRST PRES	SENTATION OF M	ULTIPLE DEPE	NDENT C	LAIM		L	+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FEE	-	OR	TOTAL ADDIT." FEE	
		(Column 1)		(Columi	n 2)	(Column 3)						
8		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOU PAID FO	ST ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MEN	Total		Minus *	**		=		X \$ 25 =		OR	X \$ 50 =	
AMENDMENT	Independent	- 1	Minus *	***		=		X \$ 100 =		OR	X \$ 200 =	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =		OR	+ \$ 360 =	
		,	····			,	1	FEE		OR	TOTAL ADDIT. FEE	
					•	•			•			
• .											•	i
** H	If the "Highest Nur	umn 1 is less than the our umber Previously Paid	For IN THIS SPACE	CE is less th	han '20'	r, enter "20".						
		mber Previously Paid in the Previously Paid F					n the	appropriate box	in column 1.			-

FORM PTO-875 (Rev. 02/2005)

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